

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF NEW YORK

**FILED**  
IN CLERK'S OFFICE  
U.S. DISTRICT COURT E.D.N.Y.  
★ JAN 31 2018 ★

LONG ISLAND OFFICE

RAHKAJ. R. PATEL

3 MOUNTAIN STREET

LAKE RONKONKOMA. N.Y. 11779

*(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)*

**-against-**

WINTHROP UNIVERSITY HOSPITAL

259 15 STREET

MINEOLA. N.Y. 11501

*(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)*

**Complaint for Employment  
Discrimination**

Case No.

**CV18 0683**

*(to be filled in by the Clerk's Office)*

Jury Trial: Yes No  
*(check one)*

**AZRAK, J.**

**SHIELDS, M.J.**

**RECEIVED**

**JAN 31 2018**

**EDNY PRO SE OFFICE**

**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>PANKAJ R. PATEL</u>
Street Address	<u>3 MOUNTAIN STREET</u>
City and County	<u>LAKE BOKKONOMA</u>
State and Zip Code	<u>N.Y. 11775</u>
Telephone Number	<u>631-948-5109</u>
E-mail Address	<u>gurdam @ gmail.com</u>

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

**Defendant No. 1**

Name	<u>WINTHROP UNIVERSITY HOSPITAL</u>
Job or Title (if known)	<u></u>
Street Address	<u>254 1<sup>ST</sup> STREET</u>
City and County	<u>MINEOLA</u>
State and Zip Code	<u>N.Y. 11501</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

**Defendant No. 2**

Name	<u></u>
Job or Title (if known)	<u></u>
Street Address	<u></u>
City and County	<u></u>

State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
(if known)

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is:

Name WINTHROP UNIVERSITY HOSPITAL  
Street Address 259 1<sup>ST</sup> STREET  
City and County MINEOLA  
State and Zip Code N.Y. 11501  
Telephone Number \_\_\_\_\_

**II. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to (*check all that apply*):

Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*

Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

Other federal law (*specify the federal law*):

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Relevant state law (*specify, if known*):

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Relevant city or county law (*specify, if known*):

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### III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):

Failure to hire me.

✓ Termination of my employment.

Failure to promote me.

✓ Failure to accommodate my disability.

✓ Unequal terms and conditions of my employment.

✓ Retaliation.

Other acts (*specify*): \_\_\_\_\_

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

2005, Beginning 2011 Last Year 1976 September 15 2014  
Regiloes dis July 2016. See attached letter

C. I believe that defendant(s) (*check one*):

is/are still committing these acts against me.

☒ is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):

race \_\_\_\_\_

color \_\_\_\_\_

gender/sex \_\_\_\_\_

religion ☒ HINDU \_\_\_\_\_

national origin \_\_\_\_\_

age. My year of birth is \_\_\_\_\_. (*Give your year of birth only if you are asserting a claim of age discrimination.*)

disability or perceived disability (*specify disability*)

Both Shoulder Raised cutt due to Patient Pulling.  
& Both Knees bending up & down to lift Patient

E. The facts of my case are as follows. Attach additional pages if needed.

See Attached Papers & docs.

(*Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.*)

#### IV. Exhaustion of Federal Administrative Remedies

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

October 16<sup>th</sup> 2017

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- B. The Equal Employment Opportunity Commission (check one):

has not issued a Notice of Right to Sue letter.

☒ issued a Notice of Right to Sue letter, which I received on (date)

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(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

60 days or more have elapsed.

less than 60 days have elapsed.

#### V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Page 9 1st Page

Discrimination against based upon my disability - Under Susan  
claims back Pay front Pay - unpaid work not finished  
due to no PTO time approved due to lack of coverage - CT Cause  
fears - Could not get medicine due to lack of prescription coverage.

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## VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 01.30, 2018.

Signature of Plaintiff	<u>Pankaj. R. Patel.</u>
Printed Name of Plaintiff	<u>PAKJAS. R. PATEL</u>

Ms. Rachel Jacobson

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January 9, 2018

Based upon information provided to us, we believe that Mr. Patel has claims against Winthrop for disability discrimination, in violation of the Americans with Disabilities Act (“ADA”), 42 U.S.C. §§ 11201 *et seq.*, the New York State Human Rights Law (“NYSHRL”), N.Y. Executive Law §§ 290 *et seq.*, for religious discrimination in violation of Title VII, 42 U.S.C §§ 2000e *et seq.* and the NYSHRL. We also believe that Mr. Patel has claims against Winthrop for retaliating against him for taking protected medical leave, in violation of the ADA and the Family and Medical Leave Act (“FMLA”), 29 U.S.C. §§ 2601 *et seq.*

### Employment History

Mr. Patel began working for Winthrop on a *per diem* basis on or about July 18, 1998. In 2002, he was hired as a full-time Nuclear Medicine Technologist (“NMT”). Mr. Patel’s duties and responsibilities included preparing patients for scans and imaging, by injecting them with the necessary isotopes, and then performing the scans.

Throughout his employment, Mr. Patel was qualified to perform his position, proficient at his job, and a hard-working employee who received positive performance reviews. Additionally, he went above and beyond to help, skipping lunch on many occasions to cover inpatient work, which was beyond his normal duties. He frequently received compliments for his hard work and dedication from supervisors. On one occasion, on or about March 8, 2015, Gina Berrent sent an email to Ms. Judge noting Mr. Patel’s exemplary efforts, stating that “it was so nice to see such cooperation and help”.

The Nuclear Medicine department consisted of three employees. Two of the employees only performed inpatient work. Mr. Patel, the other employee, mainly performed outpatient work. The inpatient NMTs were not permitted to cover outpatient work, since the inpatient work was deemed more important. This meant that no regular employees were available to cover the shift if Mr. Patel was unable to work, and appointments usually had to be cancelled. Moreover, if an inpatient NMT was unable to work, Mr. Patel would be required to cancel his outpatient appointments to help cover the inpatient shift. Since Mr. Patel was the only full-time outpatient NMT, the only individuals available to cover the outpatient work were *per diem* NMTs, of which there were not enough to cover all of the appointments.

### Uncompensated Coursework

On or about September 19, 2012, Mr. Patel enrolled in a Computed Tomography Continuing Professional Education Program at Stony Brook University. Winthrop required that Mr. Patel take the course in order to operate a Nuclear Camera that they were purchasing. However, Winthrop never informed Mr. Patel that he must apply for tuition reimbursement before the course begins and subsequently submit his grade. The course ran from September 22, 2012 until December 22, 2012. Mr. Patel successfully completed the course, and received a Certificate of Completion from Stony Brook University. Because Mr. Patel was unaware of the process, he was denied reimbursement for the course, even after he provided Winthrop with proof of completion.



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Medical Conditions and Leave

Mr. Patel has experienced many issues throughout the years, which have required him to take time off to have multiple surgeries and treatments, including on his shoulders, knees, ear, eyes, and back.

Right Shoulder

Mr. Patel began experiencing pain in his right shoulder in or around early 2005. The pain initiated from when a patient pulled on Mr. Patel's right arm attempting to get up while lying on a table. He would eventually go on to have two surgeries to repair his right shoulder. Mr. Patel was informed that the injury is non-repairable, because all of the tissue is diseased and gone. He continues to experience pain in his right shoulder, and has a limited range of motion.

Knees

Beginning in 2011, Mr. Patel has also experienced severe knee pain, which made it very difficult for him to stand or walk, and he required surgery on both of his knees due to his osteoarthritis. He had surgery on his right knee on or about February 2, 2011. He was required to complete many follow-up visits to the surgery, and the pain continued requiring more doctor visits throughout the year. He had to have another surgery for a meniscal tear on or about February 2, 2012. Mr. Patel was required to take a month and a half of leave following the surgery. Mr. Patel's knee pain continued and he had many doctors visits throughout 2012, 2013, and 2014, where he received more injections to help with his pain. If Mr. Patel was scheduled for work during these appointments, he was forced to take the day off.

Ear

Mr. Patel has also always had issues with his left ear. In 1976, he had surgery to repair a perforated eardrum. The surgery was not a complete success, and to this day, he continues to experience ear problems, which consist of chronic infections, vertigo, and migraines. As a result of his condition, Mr. Patel is required to call out of work on short notice on occasion. On or around June 28, 2013, Mr. Patel had another surgery to repair a lesion on his auditory canal and his perforated eardrum. This surgery was partially a success, and while his problems do not occur as frequently, he still experiences issues pertaining to his ear. Mr. Patel has been forced to take off due to his ear issues over ten times.

Left Shoulder

On or around September 15, 2014, Mr. Patel began experiencing pain in his left shoulder, and began seeing a doctor for this pain. Since the pain would not subside due to a tear in his rotator cuff and his biceps tendon, he underwent surgery on or about October 27, 2015. After the surgery

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there were many follow-up appointments and physical therapy in 2015 and 2016 to help the healing process and to regain his range of movement.

Back

Beginning in or around August 2016, Mr. Patel needed physical therapy due to Sciatica and degenerative disc disease. He experienced severe pain and trouble walking. However, while Ms. Judge stated that she understood his issues, he was denied short term disability leave. Mr. Patel continued to work through the pain for three weeks, less a few days only when the pain was so severe that he could not walk at all. Around this time, Mr. Patel was issued a warning for absenteeism.

He used physical therapy to try to help alleviate the pain, and attended weekly appointments including on or about August 22, 2016, August 29, 2016, September 7, 2016, and September 14, 2016.

Religious Discrimination

During the summer of 2016, Mr. Patel was invited to attend an exclusive religious event in Athens, Greece from July 23, 2016 until July 31, 2016. Mr. Patel requested time off for the event, and provided documentation informing Ms. Judge of the cause, and the importance of the event. His request was denied.

On or about July 15, 2016, Mr. Patel submitted a time off request to attend a religious function from August 26-27, 2016. Originally, his request was denied due to "no coverage", even though he was the first NMT to request off for those days, and the other two inpatient NMTs requested off after him. After raising the issue again, his request was approved on or about July 27, 2016.

Though Mr. Patel did not request time off for religious reasons often, it was a common occurrence for his requests to be denied.

Mr. Patel was normally scheduled for four appointments each morning. This was more than the morning schedule could handle, and frequently prevented Mr. Patel from being able to take his lunch break. During lunch, Mr. Patel regularly prayed in his office, and Ms. Judge was aware of this. In or around December 2016, Mr. Patel was praying in his office. Ms. Judge witnessed this and issued Mr. Patel a warning because she believed that he was sleeping in his office.

Change in Supervision

Until December 2016, Mr. Patel was supervised by Maurine Judge. Under her supervision, Mr. Patel received positive performance evaluations. However, the only criticism was that he was asked to reduce the amount of time that he took off.

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In January 2017, Maria Borrego took over as the temporary Administrative Manager of the department and became Mr. Patel's supervisor. As soon as Ms. Borrego began as Mr. Patel's supervisor, she gave Mr. Patel a negative performance evaluation, marking many categories as "Needs Improvement", and commenting that it was based mainly on his excessive absences. She told him that normally he would be terminated, but because of all of his past positive performance evaluations, he would be given another chance.

With Ms. Borrego as his supervisor, Mr. Patel was not able to leave early if he finished his daily appointments, and would be required to complete administrative and secretarial tasks, and other tasks that were not part of his job description. Other employees and NMTs were able to ask the Office Coordinator, Jekaterina Goodzeit, to leave early if they were finished with their work, and would usually be granted permission. Other employees were also not required to complete menial tasks.

#### Further Disabilities and Medical Leave

##### Knees - Part 2

Mr. Patel's problems in both of his knees continued throughout the years, and became severe again in or around January 2017, as a result of his osteoarthritis. He returned for frequent doctor's visits to try to alleviate the pain, including in January and February 2017.

##### Eyes

On or about April 11, 2017, Mr. Patel was scheduled to have cataracts surgery on his left eye. His right eye surgery was scheduled for May 9, 2017. Mr. Patel notified Ms. Borrego and was granted time off for April 11-12, 2017, and May 9-10, 2017. Approximately two days before the scheduled left eye surgery, he fell down his basement stairs and injured that eye. Therefore, he was unable to have surgery on the left eye on the scheduled date, and instead had to have the surgery on his right eye on that day. Mr. Patel texted Ms. Borrego about his injury, stating "I fell down my basement stairs and have cut on my ..." Ms. Borrego used the Apple iPhone iMessage function to add a "laugh" to the message (which adds a bubble saying "HAHA" next to the sender's message), essentially laughing at Mr. Patel's misfortune.

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Teeth

In or around April 2017, Mr. Patel requested time off in order to have dental surgery. In an email sent on April 18, 2017, Ms. Goodzeit, and not Ms. Borrego, approved the request.<sup>2</sup> This led Mr. Patel to believe that Ms. Goodzeit was authorized to grant him permission for all future requests, similar to all other employees in his department.

Termination

On May 5, 2017, Mr. Patel finished his work early and was looking to leave early to attend a religious function at his temple in Schuylkill Haven, Pennsylvania. Mr. Patel decided not to request the full day off, because he knew his request would be denied (due to lack of coverage). He (and the nurses) also only had morning patients scheduled for that day, so he knew that the afternoon would be free. That morning, he asked Ms. Goodzeit if he would be able to leave at 2:30 PM. She approved the request and told Mr. Patel to email Ms. Borrego to let her know, which he did, shortly before he left at about 2:22 PM. Approximately five minutes after he left, Ms. Borrego called him to ask if he left. Mr. Patel affirmed that he left, and offered to return to work. Ms. Borrego told him not to return, and that they would discuss it on the following Monday. Later that day, at about 5:00 PM, Ms. Borrego called Mr. Patel again to tell him that he was suspended for leaving without permission, and for not reporting to her.

On or about May 18, 2017, Ms. Borrego called Mr. Patel to inform him that he has been terminated. She also told him that he is not able to file an employee grievance with Winthrop. (He later learned from Human Resources that he was able to file a grievance.)

Grievance

On or about May 23, 2017, Mr. Patel filed a grievance with Winthrop, seeking to be reinstated. A grievance meeting was held on or about June 13, 2017. During the meeting, Edward Chewens, Senior Vice President of Physician Practices and Ambulatory Networks, found that Mr. Patel was already on final warning for unavailability, due to his need to take sick leave and unscheduled time off. He also claimed that Mr. Patel's sick leave notes were fraudulent. The grievance was therefore denied.

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<sup>2</sup> Mr. Patel was trying to schedule time for dental surgery within Winthrop. He could not schedule the surgery because Ms. Borrego made him schedule the surgery before requesting time off, but he was unsure if his time off requests would be granted. He was terminated before he could have the surgery and lost his benefits of reduced-cost surgery and was therefore unable to afford it, and has yet to have it completed. To the extent that he was terminated to prevent him from taking this upcoming medical leave, Mr. Patel could establish a claim for interference with his rights to take protected medical leave under the FMLA.

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Mr. Patel did not receive notice of the grievance decision until on or about July 22, 2017, although Winthrop had the decision prepared, waiting in a FedEx overnight package, since on or about June 23, 2017.

On or about August 30, 2017, Ms. Borrego, in what appears to be an attempt to hide any wrongdoing, removed the “laugh” from the iMessage that Mr. Patel sent her concerning the fall prior to his eye surgery, in early 2017.

### Legal Claims

Based upon the above-stated facts, we believe that Winthrop unlawfully discriminated against Mr. Patel based on his disabilities, in violation of the ADA and the NYSHRL. We also believe that Winthrop unlawfully retaliated against Mr. Patel for taking protected medical leave, in violation of the FMLA.

### Disability Discrimination

Based upon the above facts, it appears that Winthrop discriminated against Mr. Patel based upon his disabilities. The ADA prohibits discrimination against qualified individuals with a disability. *See* 42 U.S.C. §§ 12101 *et seq.* Specifically, it provides that “no covered employer shall discriminate against a qualified individual with a disability because of the disability in regard to the terms and conditions of employment.” *See Sutton v. United Air Lines, Inc.*, 119 S.Ct. 2139, 2144 (1999) (quoting 42 U.S.C. § 12101(a)). The NYSHRL protects employees from the same adverse employment actions and offers comparable remedies to the federal statute, but without limitation on available compensatory damages. *See Reeves v. Johnson Controls*, 140 F.3d 144, 154 (2d Cir. 1998); *State Div. of Human Rts. v. Xerox Corp.*, 65 N.Y.2d 213 (1985).

In order to establish a *prima facie* case of discrimination, a plaintiff must demonstrate that: (1) he is an individual with a disability; (2) he is otherwise qualified to perform essential job requirements, with or without reasonable accommodations; and (3) he suffered an adverse employment action because of his disability. *Giordano v. City of New York*, 274 F.3d 740, 747 (2d Cir. 2001). Examples of materially adverse employment actions include termination of employment, a demotion evidenced by a decrease in wage or salary, a less distinguished title, a material loss of benefits, and significantly diminished material responsibilities. *See Feingold v. New York*, 366 F.3d 138, 152 (2d Cir. 2004).

The ADA defines a disabled individual as one who (i) has a physical or mental impairment which substantially limits one or more of such person’s major life activities, (ii) has a record of such an impairment, or (iii) is regarded as having such an impairment. *Weixel v. Board of Ed. of N.Y.*, 287 F.3d 138, 147 (2d Cir. 2002), citing 29 U.S.C. § 705(20)(B); 42 U.S.C. § 12102(2). Under the NYSHRL, individuals with disabilities include, but are not limited to, those who have (a) a physical impairment resulting from anatomical, physiological, genetic or neurological conditions which prevents the exercise of a normal bodily function or is demonstrable by medically accepted clinical



**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION  
New York District Office**

33 Whitehall Street, 5<sup>th</sup> Floor  
New York, NY 10004-2112  
(212) 336-3620  
TTY (212) 336-3622

Pankaj Patel  
3 Mountain Street  
Lake Ronkonkoma, NY 11779

**Re: EEOC Charge No. 520-2018-00094  
Pankaj Patel v. Winthrop University Hospital**

Dear Mr. Patel:

The Equal Employment Opportunity Commission (hereinafter referred to as the "Commission"), has reviewed the above-referenced charge according to our charge prioritization procedures. The procedures apply to all open charges in our inventory and call for us to focus our limited resources on those cases that are most likely to result in findings of violations of the laws we enforce.

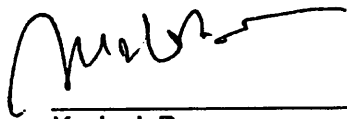
In accordance with these procedures, we have examined your charge based upon the information and evidence you submitted. You allege that you were discriminated against by Winthrop University Hospital ("Respondent") on the basis of your religion (Hinduism), in violation of Title VII of the Civil Rights Act of 1964, as amended.

We have evaluated your charge based upon the information you submitted, and have determined that further investigation will unlikely result in a determination that Respondent violated one of the federal laws enforced by the Commission. Therefore, your charge will be dismissed.

Attached is your Dismissal and Notice of Rights. If you want to pursue this matter further in federal court, your lawsuit must be filed within 90 days of your receipt of the Notice.

Please contact Federal Investigator Mabel Tso at (212) 336-3762 if you have any questions.

Sincerely,

  
\_\_\_\_\_  
Kevin J. Berry  
District Director

**NOV 13 2017**

\_\_\_\_\_  
Date

enc.



J20-2018-00094

MT



# U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION INTAKE QUESTIONNAIRE

 EQUAL EMPLOYMENT OPPORTUNITY COMMISSION  
NEW YORK DISTRICT OFFICE

OCT 16 2017

DATE RECEIVE

Please immediately complete this entire form and return it to the U.S. Equal Employment Opportunity Commission ("EEOC"). REMEMBER, a charge of employment discrimination must be filed within the time limits imposed by law, within 180 days or in some places within 300 days of the alleged discrimination. When we receive this form, we will review it to determine EEOC coverage. Answer all questions completely, and attach additional pages if needed to complete your responses. If you do not know the answer to a question, answer by stating "not known." If a question is not applicable, write "N/A." (PLEASE PRINT)

## 1. Personal Information

Last Name: PATEL First Name: PANNAO MI: R  
 Street or Mailing Address: 3 MOUNTAIN STREET Apt or Unit #: \_\_\_\_\_  
 City: LAKE RONKONKOMA County: SURFOLK State: N.Y Zip: 11779  
 Phone Numbers: Home: (631) 467-2712 Work: ( )  
 Cell: (631) 948-5109 Email Address: guroqm@gmail.com  
 Date of Birth: 9/13/1950 Sex: ☒ Male ☐ Female Do You Have a Disability? ☒ Yes ☐ No

Please answer each of the next three questions.

i. Are you Hispanic or Latino? ☐ Yes ☒ No  
 ii. What is your Race? Please choose all that apply. ☐ American Indian or Alaskan Native ☒ Asian ☐ White  
☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander

iii. What is your National Origin (country of origin or ancestry)? UGANDA (INDIA)

Please Provide The Name Of A Person We Can Contact If We Are Unable To Reach You:

Name: Dhimesh P. Patel Relationship: SON  
 Address: 3 MOUNTAIN STREET City: LAKE RONKONKOMA State: N.Y Zip Code: 11779  
 Home Phone: (631) 335-9490 Other Phone: ( )

2. I believe that I was discriminated against by the following organization(s): (Check those that apply)  
☒ Employer ☐ Union ☐ Employment Agency ☐ Other (Please Specify) \_\_\_\_\_

Organization Contact Information (If the organization is an employer, provide the address where you actually worked. If you work from home, check here and provide the address of the office to which you reported.) If more than one employer is involved, attach additional sheets.

Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ County: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( )  
 Type of Business: \_\_\_\_\_ Job Location if different from Org. Address: \_\_\_\_\_  
 Human Resources Director or Owner Name: \_\_\_\_\_ Phone: ( )

Number of Employees in the Organization at All Locations: Please Check (✓) One  
☐ Fewer Than 15 ☒ 15 - 100 ☐ 101 - 200 ☐ 201 - 500 ☐ More than 500

3. Your Employment Data (Complete as many items as you are able.) Are you a federal employee? ☐ Yes ☒ No

Date Hired: AUG 01 1997 Job Title At Hire: NUCLEAR MEDICINE TECHNOLOGIST  
 Pay Rate When Hired: \$35.40 per hr. Last or Current Pay Rate: \$43.00 per hr.  
 Job Title at Time of Alleged Discrimination: NUCLE. MED. TECH Date Quit/Discharged: 5/15/2017  
 Name and Title of Immediate Supervisor: MARIA BARRERA

If Job Applicant, Date You Applied for Job \_\_\_\_\_ Job Title Applied For \_\_\_\_\_

4. What is the reason (basis) for your claim of employment discrimination?

FOR EXAMPLE, if you feel that you were treated worse than someone else because of race, you should check the box next to Race. If you feel you were treated worse for several reasons, such as your sex, religion and national origin, you should check all that apply. If you complained about discrimination, participated in someone else's complaint, or filed a charge of discrimination, and a negative action was threatened or taken, you should check the box next to Retaliation.

☐ Race ☐ Sex ☐ Age ☒ Disability ☐ National Origin ☒ Religion ☐ Retaliation ☐ Pregnancy ☐ Color (typically a difference in skin shade within the same race) ☐ Genetic Information; circle which type(s) of genetic information is involved: i. genetic testing ii. family medical history iii. genetic services (genetic services means counseling, education or testing)

If you checked color, religion or national origin, please specify: \_\_\_\_\_

If you checked genetic information, how did the employer obtain the genetic information? \_\_\_\_\_

Other reason (basis) for discrimination (Explain): \_\_\_\_\_

5. What happened to you that you believe was discriminatory? Include the date(s) of harm, the action(s), and the name(s) and title(s) of the person(s) who you believe discriminated against you. Please attach additional pages if needed.  
(Example: 10/02/06 - Discharged by Mr. John Soto, Production Supervisor)

A. Date: 05/05/2017 Action: Suspended by Maria Borrego.

Name and Title of Person(s) Responsible: MARIA BORREGO.

B. Date: 6/5/17 Action: suspended & terminated on 5/18/17

Name and Title of Person(s) Responsible: \_\_\_\_\_

6. Why do you believe these actions were discriminatory? Please attach additional pages if needed.

Left early after telling coordinator as acting manager Maria Borrego was not available, E mailed her for permission but did not reply but called me right @

7. What reason(s) were given to you for the acts you consider discriminatory? By whom? His or Her Job Title?

I left without manager's ac but meanwhile every body else can go with permission of coordinator is manager is not in building. That best up that explain me only.

8. Describe who was in the same or similar situation as you and how they were treated. For example, who else applied for the same job you did, who else had the same attendance record, or who else had the same performance? Provide the race, sex, age, national origin, religion, or disability of these individuals, if known, and if it relates to your claim of discrimination. For example, if your complaint alleges race discrimination, provide the race of each person; if it alleges sex discrimination, provide the sex of each person; and so on. Use additional sheets if needed.

Of the persons in the same or similar situation as you, who was treated better than you?

Full Name	Race, sex, age, national origin, religion or disability	Job Title	Description of Treatment
-----------	---	-----------	--------------------------

A. \_\_\_\_\_

B. \_\_\_\_\_

② I left. left at 0230PM got call at 2:35PM. Told her can come back but was told I would come back but she told we will discuss this on Monday.



Of the persons in the same or similar situation as you, who was treated *worse* than you?

Full Name

Race, sex, age, national origin, religion or disability

Job Title

Description of Treatment

A. \_\_\_\_\_

B. \_\_\_\_\_

Of the persons in the same or similar situation as you, who was treated the *same* as you?

Full Name

Race, sex, age, national origin, religion or disability

Job Title

Description of Treatment

A. \_\_\_\_\_

B. \_\_\_\_\_

Answer questions 9-12 only if you are claiming discrimination based on disability. If not, skip to question 13. Please tell us if you have more than one disability. Please add additional pages if needed.

9. Please check all that apply:

- ☒ Yes, I have a disability  
☐ I do not have a disability now but I did have one  
☐ No disability but the organization treats me as if I am disabled

10. What is the disability that you believe is the reason for the adverse action taken against you? Does this disability prevent or limit you from doing anything? (e.g., lifting, sleeping, breathing, walking, caring for yourself, working, etc.).  
lifting and related work.

11. Do you use medications, medical equipment or anything else to lessen or eliminate the symptoms of your disability?  
☐ Yes ☒ No

If "Yes," what medication, medical equipment or other assistance do you use?

12. Did you ask your employer for any changes or assistance to do your job because of your disability?  
☐ Yes ☒ No

If "Yes," when did you ask? \_\_\_\_\_ How did you ask (verbally or in writing)? \_\_\_\_\_

Who did you ask? (Provide full name and job title of person)

Describe the changes or assistance that you asked for: \_\_\_\_\_

How did your employer respond to your request? \_\_\_\_\_

13. Are there any witnesses to the alleged discriminatory incidents? If yes, please identify them below and tell us what they will say. (Please attach additional pages if needed to complete your response)

Full Name	Job Title	Address & Phone Number	What do you believe this person will tell us?
A. _____	_____	_____	_____
B. _____	_____	_____	_____

14. Have you filed a charge previously on this matter with the EEOC or another agency? ☐ Yes ☒ No

15. If you filed a complaint with another agency, provide the name of agency and the date of filing: \_\_\_\_\_

16. Have you sought help about this situation from a union, an attorney, or any other source? ☐ Yes ☒ No  
Provide name of organization, name of person you spoke with and date of contact. Results, if any? \_\_\_\_\_

Please check one of the boxes below to tell us what you would like us to do with the information you are providing on this questionnaire. If you would like to file a charge of job discrimination, you must do so either within 180 days from the day you knew about the discrimination, or within 300 days from the day you knew about the discrimination if the employer is located in a place where a state or local government agency enforces laws similar to the EEOC's laws. If you do not file a charge of discrimination within the time limits, you will lose your rights. If you would like more information before filing a charge or you have concerns about EEOC's notifying the employer, union, or employment agency about your charge, you may wish to check Box 1. If you want to file a charge, you should check Box 2.

**BOX 1** ☐ I want to talk to an EEOC employee before deciding whether to file a charge. I understand that by checking this box, I have not filed a charge with the EEOC. I also understand that I could lose my rights if I do not file a charge in time.

**BOX 2** ☒ I want to file a charge of discrimination, and I authorize the EEOC to look into the discrimination I described above. I understand that the EEOC must give the employer, union, or employment agency that I accuse of discrimination information about the charge, including my name. I also understand that the EEOC can only accept charges of job discrimination based on race, color, religion, sex, national origin, disability, age, genetic information, or retaliation for opposing discrimination.

Pankaj R. Patel.  
Signature

10/16/2017

Today's Date

**PRIVACY ACT STATEMENT:** This form is covered by the Privacy Act of 1974: Public Law 93-579. Authority for requesting personal data and the uses thereof are:

- 1) **FORM NUMBER/TITLE/DATE.** EEOC Issue Questionnaire (9/20/06).
- 2) **AUTHORITY.** 42 USC § 2000e-6(p), 29 USC § 211, 29 USC § 629, 42 USC § 12117(a), 42 USC § 20001-4.
- 3) **PRINCIPAL PURPOSE.** The purpose of this questionnaire is to solicit information about claims of employment discrimination, determine whether the EEOC has jurisdiction over those claims, and provide charge filing counseling, as appropriate. Consistent with 29 CFR 1601.12(p) and 29 CFR 1629.8(c), this questionnaire may serve as a charge if it meets the elements of a charge.
- 4) **ROUTINE USES.** EEOC may disclose information from this form to other state, local and federal agencies as appropriate or necessary to carry out the Commission's functions, or if EEOC becomes aware of a civil or criminal law violation. EEOC may also disclose information to respondents in litigation, to congressional offices in response to inquiries from parties to the charge, to disciplinary committees investigating complaints against attorneys representing the parties to the charge, or to federal agencies inquiring about hiring or security clearance matters.
- 5) **WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL FOR NOT PROVIDING INFORMATION.** Providing this information is voluntary but the failure to do so may hamper the Commission's investigation of a charge. It is not mandatory that this form be used to provide the requested information.

## U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

New York District Office – INTAKE

33 Whitehall Street, 5<sup>th</sup> Floor

New York, NY 10004

This agency enforces the laws against discrimination in employment based on race, color, religion, national origin, age, sex, disability, or genetic information. The event you are complaining about must have occurred within a maximum of 300 days of the filing of a charge. Our jurisdiction covers public and private employers with 15 or more employees (20 or more employees for age complaints), labor unions, and employment agencies located in New York State south of Albany. If you work for the Federal Government, you must first contact your agency's Equal Employment Office in order to file a complaint.

To better serve your interest and avoid delays in processing your complaint, please answer the following questions:

NAME: PAANKAJ. R. PATEL.

TEL. NO. WHERE WE CAN CONTACT YOU: 631 948 5109

A. What was the Latest or Most Recent Date of discrimination which you are alleging?

5/18/17

B. Does your employer have fewer than 15 employees (20 for age complaints)?

Yes ☐ No ☒ How many employees? 50

C. Have you filed a complaint with another agency (such as the New York State Division of Human Rights or the New York City Commission on Human Rights)?

Yes ☐ No ☒

If Yes, Name of agency and date of filing:

D. Do you work for a Federal Government Agency (Such as the U.S. Postal Service)?

Yes ☐ No ☒

**\*\*\*IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE SEE THE RECEPTIONIST, AS THE EEOC MAY NOT HAVE JURISDICTION OVER YOUR CLAIMS**

If you answered NO to the above questions, please fill out the questionnaire and return it to the receptionist, who will give you further instructions about our procedures.

EEOC Form 161 (11/16)

## U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

## DISMISSAL AND NOTICE OF RIGHTS

To: **Pankaj Patel**  
**3 Mountain Street**  
**Lake Ronkonkoma, NY 11779**

From: **New York District Office**  
**33 Whitehall Street**  
**5th Floor**  
**New York, NY 10004**

☐

On behalf of person(s) aggrieved whose identity is  
**CONFIDENTIAL (29 CFR §1601.7(a))**

EEOC Charge No.

EEOC Representative

Telephone No.

**520-2018-00094**

**Mabel Tso,**  
**Investigator**

**(212) 336-3762**

## THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

☐

The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.

☐

Your allegations did not involve a disability as defined by the Americans With Disabilities Act.

☐

The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.

☐

Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge

☒

The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.

☐

The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.

☐

Other (briefly state)

## - NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

**Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act:** This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed **WITHIN 90 DAYS** of your receipt of this notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

**Equal Pay Act (EPA):** EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission

*Kevin J. Berry*

**Kevin J. Berry,**  
**District Director**

**NOV 13 2017**

Enclosures(s)

(Date Mailed)

cc:

**Attn**  
**Director of Human Resources**  
**WINTHROP UNIVERSITY HOSPITAL**  
**200 Old Country Road**  
**Mineola, NY 11501**

Enclosure with EEOC  
Form 161 (11/16)

**INFORMATION RELATED TO FILING SUIT  
UNDER THE LAWS ENFORCED BY THE EEOC**

*(This information relates to filing suit in Federal or State court under Federal law.  
If you also plan to sue claiming violations of State law, please be aware that time limits and other  
provisions of State law may be shorter or more limited than those described below.)*

**PRIVATE SUIT RIGHTS -- Title VII of the Civil Rights Act, the Americans with Disabilities Act (ADA),  
the Genetic Information Nondiscrimination Act (GINA), or the Age  
Discrimination in Employment Act (ADEA):**

In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge **within 90 days of the date you receive this Notice**. Therefore, you should **keep a record of this date**. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed **within 90 days of the date this Notice was mailed to you** (as indicated where the Notice is signed) or the date of the postmark, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Courts often require that a copy of your charge must be attached to the complaint you file in court. If so, you should remove your birth date from the charge. Some courts will not accept your complaint where the charge includes a date of birth. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

**PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):**

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred **more than 2 years (3 years) before you file suit** may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit **before 7/1/10 – not 12/1/10** – in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice and within the 2- or 3-year EPA back pay recovery period.

**ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:**

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do not relieve you of the requirement to bring suit within 90 days.

**ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:**

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, **please make your review request within 6 months of this Notice**. (Before filing suit, any request should be made within the next 90 days.)

**IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.**